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PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Attorney Docket No.</td> <td>50623.333</td> </tr> <tr> <td>First Inventor</td> <td>Syed F.A. Hossainy</td> </tr> <tr> <td>Title</td> <td>Composite Stent With Regioselective Material and a Method of Forming the Same</td> </tr> <tr> <td>Express Mail Label No.</td> <td>EV 337 972 815 US</td> </tr> </table>	Attorney Docket No.	50623.333	First Inventor	Syed F.A. Hossainy	Title	Composite Stent With Regioselective Material and a Method of Forming the Same	Express Mail Label No.	EV 337 972 815 US
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Title	Composite Stent With Regioselective Material and a Method of Forming the Same								
Express Mail Label No.	EV 337 972 815 US								
(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))									

PTO 10/668781



<p style="text-align: center;">APPLICATION ELEMENTS</p> <p>See MPEP chapter 600 concerning utility patent application contents.</p> <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 22] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 5]</p> <p>5. Combined Declaration and Power of Attorney [Total Pages 4]</p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Newly executed (original or copy)</p> <p style="margin-left: 20px;">b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for a continuation/divisional with Box 18 completed)</p> <p style="margin-left: 20px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p style="text-align: center;">ADDRESS TO:</p> <p>Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p style="margin-left: 20px;">b. Specification Sequence Listing on:</p> <p style="margin-left: 40px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p style="margin-left: 40px;">ii. <input type="checkbox"/> paper</p> <p style="margin-left: 20px;">c. <input type="checkbox"/> Statements verifying identity of above copies</p>
<p style="text-align: center;">ACCOMPANYING APPLICATIONS PARTS</p> <p>9. <input checked="" type="checkbox"/> Copy Assignment Papers (cover sheet & documents) (7 pages)</p> <p>10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment (13 pages)</p> <p>14. <input checked="" type="checkbox"/> 2 Return Receipt Postcards (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input checked="" type="checkbox"/> Other: Copy of Power of Attorney by Assignee of Entire Interest (6 Pages)</p>	

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) of prior application No: 09/895,753

Prior application information: Examiner Tajash D. Patel Group / Art Unit: 3765

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label					
			or <input checked="" type="checkbox"/> Correspondence address below		
(Insert Customer No. or Attach bar code label here)					
Name	Paul J. Meyer, Jr.				
Address	Squire, Sanders & Dempsey L.L.P.				
	1 Maritime Plaza, Suite 300				
City	San Francisco	State	CA	Zip Code	94111
Country	USA	Telephone	(415) 954-0200	Fax	(415) 393-9887

Name (Print/Type)	Paul J. Meyer, Jr.	Registration No. (Attorney/Agent)	47,791
Signature			Date September 22, 2003

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="font-size: small; margin: 5px 0;">Effective 01/01/2003. Patent fees are subject to annual revision.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;">New</td> </tr> <tr> <td>Filing Date</td> <td>September 22, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Syed F.A. Hossainy</td> </tr> <tr> <td>Examiner Name</td> <td>Unassigned</td> </tr> <tr> <td>Art Unit</td> <td>Unassigned</td> </tr> <tr> <td>Attorney Docket No.</td> <td>50623.333</td> </tr> </table>		Application Number	New	Filing Date	September 22, 2003	First Named Inventor	Syed F.A. Hossainy	Examiner Name	Unassigned	Art Unit	Unassigned	Attorney Docket No.	50623.333
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TOTAL AMOUNT OF PAYMENT (\$) 1470.00															

<p>METHOD OF PAYMENT (check all that apply)</p> <p> <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p><input checked="" type="checkbox"/> Deposit Account:</p> <table style="width: 100%;"> <tr> <td style="width: 20%;">Deposit Account Number</td> <td>07-1850</td> </tr> <tr> <td>Deposit Account Name</td> <td>Squire, Sanders & Dempsey L.L.P.</td> </tr> </table> <p>The Director is authorized to: (check all that apply)</p> <p> <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. </p>				Deposit Account Number	07-1850	Deposit Account Name	Squire, Sanders & Dempsey L.L.P.	<p>FEE CALCULATION (continued)</p> <p>3. 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Independent Claims	9	-3 **	=	6	X	84	=	504																																																																																																																																																																																					
Multiple Dependent	0				X	0	=	0																																																																																																																																																																																					
Large Entity		Small Entity		Fee Description	Fee Paid																																																																																																																																																																																								
Fee Code	Fee (\$)	Fee Code	Fee (\$)																																																																																																																																																																																										
1202	18	2202	9	Claims in excess of 20																																																																																																																																																																																									
1201	84	2201	42	Independent claims in excess of 3																																																																																																																																																																																									
1203	280	2203	140	Multiple dependent claim, if not paid																																																																																																																																																																																									
1204	84	2204	42	** Reissue independent claims over original patent																																																																																																																																																																																									
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																									
SUBTOTAL (2)					(\$ 720)																																																																																																																																																																																								

<p>SUBMITTED BY</p>				<p>Complete (if applicable)</p>	
Name (Print/Type)	Paul J. Meyer, Jr.	Registration No. Attorney/Agent	47,791	Telephone	(415) 954-0200
Signature				Date	September 22, 2003

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